

410 IAC 1-2.5-80 Animal bites; specific control measures

Authority: IC 16-19-3-4; IC 16-41-2-1

Affected: IC 15-17-6-11; IC 16-41-2; IC 16-41-9

Sec. 80. (a) The specific control measures for animal bites are as follows:

(1) Every case of a human bitten by a domestic or wild mammal shall be reported within twenty-four (24) hours to the local health officer having jurisdiction. If a physician is in attendance, the physician shall report the bite. The report shall include requested information on postexposure rabies prophylaxis if it is being administered to the bite victim. Each reported bite shall be investigated immediately by the local health officer. This investigation shall be conducted with the purpose of determining the need for postexposure rabies prophylaxis of the bite victim and either:

(A) imposing a ten (10) day observation period on the biting animal (dog, cat, or ferret only) to determine if the animal was capable of transmitting rabies at the time of the biting incident; or

(B) submission of the head, if the biting animal is a potential rabies vector, to the department laboratory to determine if it was infected with rabies.

(2) Isolation of persons is not necessary.

(3) Concurrent disinfection is not necessary.

(4) Quarantine shall be applied to the biting animal as follows:

(A) Any apparently healthy dog, cat, or ferret that has bitten a person, or any dog, cat, or ferret suspected of being rabid shall be confined and held in observation for the period specified in IC 15-17-6-11 (not less than ten (10) days) or humanely killed at once (when necessary) for laboratory examination. The confinement shall be:

(i) under the supervision of the state veterinarian or a licensed, accredited veterinarian, or other person designated by the official quarantining the animal; and

(ii) at the expense of the owner.

(B) Any illness in the confined dog, cat, or ferret shall be reported immediately to the local health department. Animals under confinement shall not be immunized against rabies during the observation period. The head of any such dog, cat, or ferret that dies during the period of observation, or is killed subsequent to having bitten a person or another animal, shall be:

(i) removed;

(ii) packed in an iced container, but not frozen; and

(iii) forwarded immediately to the laboratory of the department for rabies testing.

(C) Any unhealthy or terminally injured dog, cat, or ferret that has bitten a person shall be humanely killed immediately for laboratory examination. The animal's owner shall be responsible for having the unhealthy or terminally injured animal euthanized, head removed, and shipped to the department for rabies examination. In the case of a stray animal or an animal whose owner cannot be found, the local health department shall assume this responsibility.

(D) Any rabies vector species (including, but not limited to, bats, skunks, raccoons, foxes, and other wild carnivores) that has bitten a human or a domestic animal, or is suspected of being rabid, shall not be placed under observation, but shall be humanely killed at once in a manner that does not cause trauma to the head or brain. The head shall be refrigerated, but not frozen, and submitted within forty-eight (48) hours to the laboratory of the department. Exceptions to this section may be made only at the discretion of the local health officer or the state veterinarian, or both. Animals covered under this section include, but are not limited to, the following:

(i) Wild animal species kept as pets.

(ii) Wild animal species kept in captivity for any other purpose, including those permitted by the Indiana department of natural resources under 312 IAC 9-10-4, 312 IAC 9-10-9, 312 IAC 9-10-9.5, and 312 IAC 9-10-11.

(iii) Wild carnivores crossbred to domestic dogs and cats (hybrids) and their offspring.

(E) The bite victim shall be notified after:

(i) a dog, cat, or ferret has passed the ten (10) day observation period in a healthy state;

or

(ii) the results of a laboratory test are available.

(F) Any person bitten or scratched by a rabies vector species (raccoon, skunk, fox, or bat) not available for rabies testing should be regarded as having been potentially exposed to rabies.

The following chart provides information on quarantine and disposition of biting animals:

Animal Type	Evaluation and Disposition of Animal	Postexposure Prophylaxis Recommendation
Dogs, cats, and ferrets	Healthy and available for 10 day observation <sup>1</sup>	Should not begin prophylaxis unless animal develops symptoms of rabies <sup>2</sup>
	Rabid or suspected rabid	Immediate postexposure prophylaxis
	Unknown	Consult public officials
Skunks, raccoons, bats <sup>3</sup> . Foxes and most other wild carnivores, including those animals kept in captivity or as pets	Regard as rabid unless geographic area is known to be free of rabies or until animal proven negative by laboratory testing <sup>4</sup>	Immediate postexposure prophylaxis if animal is unavailable for testing, or if animal is available for testing, as soon as a positive result is observed
Livestock, rodents, and lagomorphs (rabbits and hares)	Consider individually	Consult public health officials. Bites from squirrels, hamsters, guinea pigs, gerbils, chipmunks, rats, mice, other rodents, rabbits, and hares almost never require antirabies treatment.
<sup>1</sup> the animal is unhealthy or has a serious injury that would make quarantine inhumane, the stray animal may be euthanized immediately and the head submitted to the rabies laboratory.		
<sup>2</sup> Postexposure prophylaxis should be started if a veterinarian identifies an animal as being symptomatic. Symptomatic animals should be euthanized and tested immediately.		
<sup>3</sup> What appears to be insignificant contact with bats may result in rabies transmission, even without clear evidence of a bite. Postexposure prophylaxis is recommended for all persons with bite, scratch, or mucous membrane exposure to a bat unless the bat is available for testing and is negative for rabies. Postexposure prophylaxis is appropriate even in the absence of bite, scratch, or mucous membrane exposure in situations in which there is a reasonable probability that such contact occurred (for example, a sleeping individual awakes to find a bat in the room, an adult witnesses a bat in the room with a previously unattended child, mentally challenged person, or intoxicated person) and rabies cannot be ruled out by testing the bat.		
<sup>4</sup> The animal should be euthanized and tested as soon as possible. Holding for observation is not allowable as time lapse from virus secretion in saliva until clinical symptoms appear have not been determined for species other than a dog, cat, or ferret. Consult with the department veterinary epidemiologist for information on presence or absence of rabies in particular species.		

(b) All bite wounds should be treated immediately in the following steps:

- (1) Clean and flush wound as first aid.
- (2) Thorough wound cleansing under medical supervision.
- (3) Evaluation of need for postexposure prophylaxis.
- (4) Tetanus prophylaxis and antibacterial treatment as needed.

(c) If the decision is made to provide postexposure prophylaxis to the individual, the following protocols must be followed, and a decision to provide postexposure prophylaxis must be reported to the department:

Guidelines for Postexposure Prophylaxis		
Vaccination Status	Treatment	Regimen *
Not previously vaccinated	Local wound cleaning	All postexposure treatment should begin with immediate thorough cleansing of all wounds with soap and water.
	Human rabies immune globulin (HRIG)	20 IU/kg body weight. If anatomically feasible, the full dose should be infiltrated around the wound or wounds. Any remaining volume should be administered intramuscularly at a site distant from vaccine inoculation.
	Vaccine	Human diploid cell vaccine (HDCV), purified chick embryo cell vaccine (PCEC), or rabies vaccine adsorbed (RVA), 1.0 ml, IM (deltoid1 ), one dose should be given on days 0, 3, 7, and 14. Immunocompromised individuals may require a 5th vaccine dose to be given on day 28.
Previously Vaccinated <sup>2</sup>	Local wound cleaning	All postexposure treatment should begin with immediate thorough cleansing of all wounds with soap and water.
	HRIG	Should not be administered to individuals who have been previously vaccinated.
	Vaccine	HDCV, PCEC, or RVA, 1.0 ml IM (deltoid1 ), one dose should be given on days 0 and 3.
* These regimens are applicable for all age groups, including children.		
<sup>1</sup> The deltoid area is the only acceptable site of vaccination for adults and older children. For younger children, the outer aspect of the thigh may be used. The vaccine should never be administered in the gluteal area. The vaccine should never be administered in the same location with the HRIG. <sup>2</sup> Any person with a history of preexposure vaccination with HDCV		
<sup>2</sup> Any person with a history of preexposure vaccination with HDCV or RVA, prior postexposure prophylaxis with HDCV or RVA, or previous vaccination with any other type of rabies vaccine and a documented history of antibody response to the prior vaccination.		

(d) Case definition is established by the department. (Indiana State Department of Health; 410 IAC 1-2.5-80; effective Dec 25, 2015)